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Bib Data Sheet

CONFIRMATION NO. 9132

<b>SERIAL NUMBER</b> 09/929,412	<b>FILING DATE</b> 08/14/2001 <b>RULE</b>	<b>CLASS</b> <del>709</del> 705	<b>GROUP ART UNIT</b> <del>2452</del> 3623	<b>ATTORNEY DOCKET NO.</b>	
<b>APPLICANTS</b> Norman Ken Ouchi, San Jose, CA;					
<b>** CONTINUING DATA *****</b> <i>Verified</i>					
<b>** FOREIGN APPLICATIONS *****</b> <i>Verified</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY **</b> ** 09/20/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <i>Allowance</i> Verified and Acknowledged <i>Examiner's Signature</i> <i>Initials</i>		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 11	<b>TOTAL CLAIMS</b> 15	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> NORMAN KEN OUCHI 20248 VIEWCREST CT <i>PO Box 20111</i> SAN JOSE, CA 95110					
<b>TITLE</b> Adaptive workflow route					
<b>FILING FEE RECEIVED</b> 355	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		